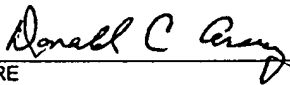


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U.S. APPLIC. NO. (if known, see 37 CFR 1.50) 09/762163		INTERNATIONAL APPLICATION NO. PCT/GB99/02425		ATTORNEY'S DOCKET NUMBER 4002-006	
				CALCULATIONS	PTO USE ONLY
17. <input type="checkbox"/> The following fees are submitted: <div style="display: flex; justify-content: space-between;"> <div> Basic National Fee (37 CFR 1.492(a)(1)-(5)): Search Report has been prepared by the EPO or JPO International preliminary examination fee paid to USPTO (37 CFR 1.482) No international preliminary examination fee paid to USPTO (37 CFR 1.482) but international search fee paid to USPTO (37 CFR 1.445(a)(2)) Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445(a)(2)) paid to USPTO International preliminary examination fee paid to USPTO (37 CFR 1.482) and all claims satisfied provisions of PCT Article 33(2)-(4) </div> <div style="text-align: right;"> \$860.00 \$690.00 \$710.00 \$1000.00 \$100.00 </div> </div>					
ENTER APPROPRIATE BASIC FEE AMOUNT =					
Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e)).				\$.00	
Claims	Number Filed	Number Extra	Rate		
Total Claims	-20 =		x \$18.00	\$	
Independent Claims	-3 =		x \$80.00	\$	
Multiple dependent claim(s) (if applicable)			+ \$270.00	\$	
TOTAL OF ABOVE CALCULATIONS =				\$860.00	
Reduction by 1/2 for filing by small entity, if applicable. Verified Small Entity Statement must also be filed. (Note 37 CFR 1.9, 1.27, 1.28).				\$	
SUBTOTAL =				\$860.00	
Processing fee of \$130.00 for furnishing the English translation later than the <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).				+	\$
TOTAL NATIONAL FEE =				\$	
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property				+	\$
TOTAL FEES ENCLOSED =				\$860.00	
				Amount to be: refunded	\$
				charged	\$
a. <input checked="" type="checkbox"/> A check in the amount of \$860.00 to cover the above fees is enclosed. b. <input type="checkbox"/> Please charge my Deposit Account No. in the amount of \$ to cover the above fees. A duplicate copy of this sheet is enclosed. c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 03-1045. A duplicate copy of this sheet is enclosed.					
NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.					
SEND ALL CORRESPONDENCE TO: Donald C. Casey 311 North Washington Street, Suite 100 Alexandria, VA 22314 (703) 548-2131					
<div style="display: flex; justify-content: space-between;"> <div> SIGNATURE  NAME Donald C. Casey REGISTRATION NUMBER 24,022 DATE </div> </div>					